

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004400

FILED  
Apr 26, 2011  
Secretary of State

**Entity Name:** TERRACE II AT RIVERWALK CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

8359 BEACON BLVD.  
SUITE 313  
FORT MYERS, FL 33907 US

**New Principal Place of Business:**

11691 GATEWAY BLVD  
SUITE 203  
FORT MYERS, FL 33913 US

**Current Mailing Address:**

8359 BEACON BLVD.  
SUITE 313  
FORT MYERS, FL 33907 US

**New Mailing Address:**

11691 GATEWAY BLVD  
SUITE 203  
FORT MYERS, FL 33913 US

**FEI Number:** 20-2772759

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAYDEN & ASSOCIATES  
8359 BEACON BLVD.  
SUITE 313  
FORT MYERS, FL 33907 US

**Name and Address of New Registered Agent:**

VISION ASSOCIATION MANAGEMENT  
11691 GATEWAY BLVD  
SUITE 203  
FORT MYERS, FL 33913 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WILLIAM BOWER

04/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MUTKA, JIM  
Address: 11691 GATEWAY BLVD SUITE 203  
City-St-Zip: FORT MYERS, FL 33913 US

Title: VP  
Name: ANDERSON, JERRY  
Address: 11691 GATEWAY BLVD SUITE 203  
City-St-Zip: FORT MYERS, FL 33913 US

Title: S/T  
Name: CYNECKI, JONDA  
Address: 11691 GATEWAY BLVD SUITE 203  
City-St-Zip: FORT MYERS, FL 33913 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: REBECCA SARVER

CAM

04/26/2011

Electronic Signature of Signing Officer or Director

Date